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80711				papers. Each additiona	paper, such as an assignment of mailing or transmission	ent or formal drawing, must
Brinks Hofer Gils	on & Lione	•		_		
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APPLICATION NO.	FILING DATE	FI	RST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/579,816	May 16, 2006	Karl J. Liskow			10987-16	5962
TITLE OF INVENTION:	PASS-THROUGH G	AGE AND MET	THOD OF GAO	SING A WORKPI	ECE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	E PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	NO	\$1510		\$300	\$1810	March 19, 2009
EXAMINER		ART UNIT	CI	ASS-SUBCLASS		
Christopher W. Fulton		2841	033-555100			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys  1_Brinks Hofer Gilson & Lione			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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(A) NAME OF ASSIGNEE Control Gaging, Inc.			(B) RESIDENCE: (CITY and STATE OR COUNTRY) Ann Arbor, Michigan			
	e assignee category or catego			☐ Individual	orporation or other private gr	oup entity Government
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